2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006257

Entity Name: STARS EDUCATION SERVICES INC.

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

STARS MIDDLE SCHOOL 1234 BLOUNTSTOWN HWY TALLAHASSEE, FL 32304

Current Mailing Address: New Mailing Address:

STARS MIDDLE SCHOOL 1234 BLOUNTSTOWN HWY TALLAHASSEE, FL 32304

FEI Number: 20-1343297 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AKIN, YALCIN P AKIN, YALCIN P 925 É. MAGNOLIA DRIVE 1234 BLOUNTSTOWN HWY

#J3 TALLAHASSEE, FL 32304 US TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 04/14/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete AKIN, YALCIN DR. AKIN, YALCIN DR. Name: Name:

925 E. MAGNOLIA DRIVE #J3 Address: 1234 BLOUNTSTOWN HWY Address: City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32304

Title: Title: (X) Change () Addition () Delete TOZOGLU, DOGAN DR. Name: TOZOGLU, DOGAN DR. Name: Address: 925 E. MAGNOLIA DRIVE, #J-3 Address: 1234 BLOUNTSTOWN HWY

City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32304

() Delete Title: Title: (X) Change () Addition

DAGLI, ARIF Name: DAGLI, ARIF DR Name: 925 E. MAGNOLIA DRIVE, #N-8 1234 BLOUNTSTOWN HWY Address: Address: City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32304

() Delete Title: Title: () Change () Addition

Name: KOVANKAYA, MESUT Name: Address: 1211 OAKS EDGE ROAD Address: City-St-Zip: TALLAHASSEE, FL 32317 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

PROVO, NATALIE M AYDIN, NECATI M DR Name: Name: 912 DELORES DRIVE 1234 BLOUNTSTOWN HWY Address: Address: City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32304

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: A. SAMET KUL MR 04/14/2009